

Fill in this information to identify your case and this filing:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern</u>		District of <u>Mississippi</u>
Case number			

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1 Homestead

Street address, if available, or other description

613 Cedar Springs DrJackson, MS 39212-5711

City State ZIP Code

Hinds

County

What is the property? Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$148,000.00

Current value of the portion you own?

\$148,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here

\$148,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
- ☒ Yes

Debtor **Leflore, Marquita J**

Case number (if known) _____

3.1 Make: Saturn Who has an interest in the property? Check one.Model: ViewYear: 2008Approximate mileage: 288000

Other information:

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$1,000.00

Current value of the portion you own?
\$1,000.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here


\$1,000.00
Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. **Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.

\$1,625.00
7. **Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
☒ Yes. Describe.

\$950.00
8. **Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No
☐ Yes. Describe.

9. **Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe.

Debtor **Leflore, Marquita J**

Case number (if known) _____

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No
- ☐ Yes. Describe.

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No
- ☒ Yes. Describe.

\$2,000.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☐ No
- ☒ Yes. Describe.

\$50.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- ☒ No
- ☐ Yes. Describe.

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
- ☐ Yes. Give specific information.

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →**\$4,625.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No
- ☒ Yes Cash:

\$4,289.00

Debtor **Leflore, Marquita J**

Case number (if known) _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes

Institution name:

17.1. Checking account:	<u>Navy FCU & Capital One</u>	<u>\$416.00</u>
17.2. Savings account:	<u>Navy FCU & Capital One</u>	<u>\$231.00</u>
17.3. Other financial account:	<u>Cash app, paypal, venmo used only for pass thru to bank accounts</u>	<u>\$0.00</u>

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific information about them.....**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No☒ Yes. List each account separately. Type of account: Institution name:

Retirement account:	<u>PERS - Debtor claims FMV</u>	<u>\$10,000.00</u>
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22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes

Debtor **Leflore, Marquita J**

Case number (if known) _____

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No
☐ Yes. Give specific information about them. ...

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them. ...

27. **Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them. ...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

- ☐ No
☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$5,000 per individual
Earned Income: \$5,000 per individual

State: \$5,000 per type / per individual

Federal: \$10,000.00
State: \$5,000.00
Local: _____

29. **Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.

Debtor **Leflore, Marquita J**

Case number (if known) _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
- ☐ Yes. Give specific information.

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
- ☐ Yes. Name the insurance company of each policy and list its value. ...

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
- ☐ Yes. Give specific information.

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☐ No
- ☒ Yes. Describe each claim.

Potential mortgage contract issueunknown**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☐ No
- ☒ Yes. Describe each claim.

Potential Pre-Petition and Post Petition Claims
Debtor retains and reserves for the debtor and Ch13 Trustee all pre-petition and post-petition claims that could be asserted against any party or entity arising or related to any state or federal statute or common law. Any funds received from such claims shall be used in part to fund the plan as confirmed.

\$0.00**35. Any financial assets you did not already list**

- ☒ No
- ☐ Yes. Give specific information.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**\$29,936.00****Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.
- ☐ Yes. Go to line 38.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here**\$0.00**

Debtor **Leflore, Marquita J**

Case number (if known) _____

Part 6:Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.☐ Yes. Go to line 47.

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$0.00**Part 7:**

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership☒ No☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$0.00**Part 8:**

List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 →

\$148,000.0056. Part 2: Total vehicles, line 5 \$1,000.0057. Part 3: Total personal and household items, line 15 \$4,625.0058. Part 4: Total financial assets, line 36 \$29,936.0059. Part 5: Total business-related property, line 45 \$0.0060. Part 6: Total farm- and fishing-related property, line 52 \$0.0061. Part 7: Total other property not listed, line 54 + \$0.00

62. Total personal property. Add lines 56 through 61.

\$35,561.00

Copy personal property total →

+ \$35,561.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$183,561.00

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern</u>		District of <u>Mississippi</u>
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>Homestead</u> <u>613 Cedar Springs Dr</u> <u>Jackson, MS 39212-5711</u>	<u>\$148,000.00</u>	<input checked="" type="checkbox"/> <u>\$44,671.31</u>	<u>Miss. Code Ann. § 85-3-21</u>
Line from <i>Schedule A/B</i> : <u>1.1</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>2008 Saturn View</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u>	<u>Miss. Code Ann. § 85-3-1(a)</u>
Line from <i>Schedule A/B</i> : <u>3.1</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. **Are you claiming a homestead exemption of more than \$214,000?**

(Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>Household goods</u> Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$1,625.00</u>	<input checked="" type="checkbox"/> <u>\$1,625.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(a)</u>
Brief description: <u>Electronics</u> Line from <i>Schedule A/B</i> : <u>7</u>	<u>\$950.00</u>	<input checked="" type="checkbox"/> <u>\$950.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(a)</u>
Brief description: <u>Clothes</u> Line from <i>Schedule A/B</i> : <u>11</u>	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(a)</u>
Brief description: <u>Jewelry</u> Line from <i>Schedule A/B</i> : <u>12</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(a)</u>
Brief description: <u>Cash</u> Line from <i>Schedule A/B</i> : <u>16</u>	<u>\$4,289.00</u>	<input checked="" type="checkbox"/> <u>\$4,289.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(a)</u>
Brief description: <u>PERS - Debtor claims FMV</u> Line from <i>Schedule A/B</i> : <u>21</u>	<u>\$10,000.00</u>	<input checked="" type="checkbox"/> <u>\$10,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(e)</u>
Brief description: <u>Federal: \$5,000 per individual Earned Income: \$5,000 per individual Federal tax</u> Line from <i>Schedule A/B</i> : <u>28</u>	<u>\$10,000.00</u>	<input checked="" type="checkbox"/> <u>\$5,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>\$5,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(j)</u> <u>Miss. Code Ann. § 85-3-1(i)</u>
Brief description: <u>State: \$5,000 per type / per individual State tax</u> Line from <i>Schedule A/B</i> : <u>28</u>	<u>\$5,000.00</u>	<input checked="" type="checkbox"/> <u>\$5,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Miss. Code Ann. § 85-3-1(k)</u>

Fill in this information to identify your case:

Debtor 1	Marquita	J	Leflore
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern		District of Mississippi
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.1	Hope FCU Mortgage	Describe the property that secures the claim:	\$103,328.69	\$148,000.00	\$0.00
Creditor's Name	<div> Attn: Mail Stop NOE 1290 1 Corporate Dr Ste 360 Number Street Lake Zurich, IL 60047-8945 City State ZIP Code </div>				
Who owes the debt? Check one.	<div> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div>				
Date debt was incurred	<div> Homestead 613 Cedar Springs Dr Jackson, MS 39212-5711 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) First Mortgage on home or property </div>				
Last 4 digits of account number					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$103,328.69

Debtor 1

Marquita**J****Leflore**

Case number (if known) _____

First Name

Middle Name

Last Name

Part 1:		Column A	Column B	Column C
Additional Page		Amount of claim	Value of collateral that supports this claim	Unsecured portion
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Do not deduct the value of collateral.		If any
2.2	<p>Describe the property that secures the claim:</p> <p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number _____</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>				
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		\$0.00		
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		\$103,328.69		

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1. LOGS Legal Group Name Bankruptcy Notices 579 Lakeland East Dr D Number Street Flowood, MS 39232-9023 City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
2. Logs Group LLC Name 1080 River Oaks Dr B-202 Number Street Flowood, MS 39232-9779 City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
3. Hope Credit Union Name Bankruptcy Notices Po Box 22886 Number Street Jackson, MS 39225-2886 City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
4. Hope Credit Union Name QWR Notices & Requests Po Box 77423 Number Street Trenton, NJ 08628-7423 City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ____
 Name Number Street City State ZIP Code	On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ____

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
First Name Middle Name Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed - Additional Page

<div><div></div><div>Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>On which line in Part 1 did you enter the creditor? ____</div> <div>Last 4 digits of account number ____</div>
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Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern</u>		District of <u>Mississippi</u>
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 <u>IRS</u> Priority Creditor's Name <u>Centralized Insolvency Operation</u> <u>Po Box 7346</u> Number Street <u>Philadelphia, PA 19101-7346</u> City State ZIP Code Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>

Debtor 1 Marquita J Leflore Case number (if known) _____
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Total claim	Priority amount	Nonpriority amount
2.2	MS Dept of Revenue Priority Creditor's Name Bankruptcy Department Po Box 22808 Number Street Jackson, MS 39225-2808 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	\$0.00	\$0.00	\$0.00
2.3	Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			

Debtor 1 Marquita J Leflore Case number (if known) _____
 First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims
3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Baptist Hospital Nonpriority Creditor's Name Billing Department 1225 N State St Number Street Jackson, MS 39202-2064 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	unknown
4.2	Mohela Student Loans Nonpriority Creditor's Name Po Box 1022 Number Street Chesterfield, MO 63006-1022 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Debtor still in school	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$103,000.00

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim
4.3

Nonpriority Creditor's Name

Last 4 digits of account number _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

4.4

Nonpriority Creditor's Name

Last 4 digits of account number _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1 Marquita J Leflore Case number (if known) _____
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1.	Baptist Medical Group Name _____ Billing Dept _____ Po Box 745336 Number _____ Street _____ Atlanta, GA 30374-5333 City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.1</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
□	Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
□	Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
□	Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
□	Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
□	Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	On which entry in Part 1 or Part 2 did you list the original creditor? Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
First Name Middle Name Last Name

Part 3: **List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<input type="checkbox"/>	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name	Line ____ of (Check one):	<input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims	
Number Street		<input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	____ _	
City	State	ZIP Code	

Debtor 1

Marquita**J****Leflore**

Case number (if known) _____

First Name

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <u>\$0.00</u>
		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$103,000.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$0.00</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$103,000.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern</u>		District of <u>Mississippi</u>
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Progressive Leasing</u> Name <u>256 W Data Dr</u> Number Street <u>Draper, UT 84020-2315</u> City State ZIP Code	Refridgerator
2.2	 Name Number Street City State ZIP Code	
2.3	 Name Number Street City State ZIP Code	
2.4	 Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern</u>		District of <u>Mississippi</u>
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

 Name of your spouse, former spouse, or legal equivalent

 Number Street

 City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

 Name

 Number Street

 City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

 Name

 Number Street

 City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Marquita	J	Leflore
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern	District of	Mississippi
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

Occupation

HR Analyst

Employer's name

MS Personnel Board

Employer's address

210 E Capitol St Ste 800

Number Street

Attn: Payroll**Jackson, MS 39201-2333**

City State ZIP Code

☐ Employed☐ Not employedHow long employed there? **4 years**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$3,695.47	
3. Estimate and list monthly overtime pay.	3. + \$0.00	+
4. Calculate gross income. Add line 2 + line 3.	4. \$3,695.47	

Debtor 1

Marquita**J****Leflore**

Case number (if known) _____

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$3,695.47	
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$491.13	
5b. Mandatory contributions for retirement plans	5b. \$332.59	
5c. Voluntary contributions for retirement plans	5c. \$0.00	
5d. Required repayments of retirement fund loans	5d. \$0.00	
5e. Insurance	5e. \$50.55	
5f. Domestic support obligations	5f. \$0.00	
5g. Union dues	5g. \$0.00	
5h. Other deductions. Specify: _____	5h. + \$0.00	+
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$874.27	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$2,821.21	
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$349.72	
8b. Interest and dividends	8b. \$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$0.00	
8d. Unemployment compensation	8d. \$0.00	
8e. Social Security	8e. \$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$0.00	
8g. Pension or retirement income	8g. \$0.00	
8h. Other monthly income. Specify: _____	8h. + \$0.00	+
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$349.72	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$3,170.93	+ \$3,170.93
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$0.00	

Debtor 1

Marquita**J****Leflore**

Case number (if known) _____

First Name

Middle Name

Last Name

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income.
Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies

12.

\$3,170.93**Combined
monthly income**

13. **Do you expect an increase or decrease within the year after you file this form?**



No.



Yes. Explain:

Debtor 1 Marquita J Leflore Case number (if known) _____
 First Name Middle Name Last Name

8a. Attached Statement

Business Income (NET) -Marquitable Essentials LLC

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income: \$349.72

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts

TOTAL PAYMENTS TO SECURED CREDITORS \$0.00

3. Other Expenses

TOTAL OTHER EXPENSES \$0.00

4. TOTAL MONTHLY EXPENSES (Add item 2 - 21) \$0.00

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

5. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 1) \$349.72

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Mississippi</u>		
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2Dependent's
ageDoes dependent live
with you?Child17☐ No. ☒ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$0.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$0.004b. \$0.004c. \$10.004d. \$0.00

Debtor 1 **Marquita J Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$300.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$100.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$301.00</u>
6d.	Other. Specify: _____	6d. <u>\$0.00</u>
7.	Food and housekeeping supplies	7. <u>\$364.93</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$0.00</u>
10.	Personal care products and services	10. <u>\$70.00</u>
11.	Medical and dental expenses	11. <u>\$55.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$172.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$0.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$150.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$90.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. <u>\$0.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1 **Marquita** **J** **Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

21. **Other.** Specify: _____

21. + **\$0.00**

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. **\$1,612.93**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. **\$0.00**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. **\$1,612.93**

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. **\$3,170.93**

23b. Copy your monthly expenses from line 22c above.

23b. **\$1,612.93**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. **\$1,558.00**

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Mississippi</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$148,000.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$35,561.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$183,561.00</u>

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$103,328.69</u>
---	---------------------

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>\$103,000.00</u>

Your total liabilities

<u>\$206,328.69</u>

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$3,170.93</u>
---	-------------------

5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$1,612.93</u>
---	-------------------

Debtor 1 Marquita J Leflore
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$4,045.19

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$103,000.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	<u>\$103,000.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Mississippi</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Marquita J Leflore
Marquita J Leflore, Debtor 1

Date 04/18/2025
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Mississippi</u>		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
- ☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____	Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____	Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Debtor 1 **Marquita J Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$11,252.57</u> <u>\$1,049.16</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For last calendar year: (January 1 to December 31, <u>2024</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$36,820.00</u> <u>(7,689.00)</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2023</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$33,392.00</u> <u>(4,354.00)</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☒ No

☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	_____	_____	_____
For last calendar year: (January 1 to December 31, <u>2024</u>) YYYY	_____	_____	_____	_____
For the calendar year before that: (January 1 to December 31, <u>2023</u>) YYYY	_____	_____	_____	_____

Debtor 1 **Marquita J Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name				<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
 Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title Potential Suit against mortgage company	Potential mortgage contract issue	unknown	<input checked="" type="checkbox"/> Pending
Case number		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input type="checkbox"/> Concluded
		City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☐ No. Go to line 11.

☒ Yes. Fill in the information below.

Debtor 1	Marquita	J	Leflore	Case number (if known) _____
	First Name	Middle Name	Last Name	

Hope FCU Mortgage _____ Creditor's Name 1 Corporate Dr Ste 360 _____ Number Street _____ Lake Zurich, IL 60047-8945 _____ City State ZIP Code	<table border="1"> <thead> <tr> <th>Describe the property</th> <th>Date</th> <th>Value of the property</th> </tr> </thead> <tbody> <tr> <td>Foreclosure scheduled</td> <td>04/25/2025</td> <td>_____</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Explain what happened</th> </tr> </thead> <tbody> <tr> <td> <input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. </td> </tr> </tbody> </table>	Describe the property	Date	Value of the property	Foreclosure scheduled	04/25/2025	_____	Explain what happened	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.
Describe the property	Date	Value of the property							
Foreclosure scheduled	04/25/2025	_____							
Explain what happened									
<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.									

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
- ☐ Yes. Fill in the details.

_____ Creditor's Name _____ Number Street _____ City State ZIP Code	<table border="1"> <thead> <tr> <th>Describe the action the creditor took</th> <th>Date action was taken</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	Describe the action the creditor took	Date action was taken	Amount	_____	_____	_____
Describe the action the creditor took	Date action was taken	Amount					
_____	_____	_____					

Last 4 digits of account number: XXXX— — — —

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
- ☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
- ☐ Yes. Fill in the details for each gift.

Debtor 1 **Marquita** **J** **Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☐ No

☒ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Hope in Life Worship Center Charity's Name _____ Number Street _____ City State ZIP Code	tithes	monthly	\$100.00

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Goodwill Charity's Name _____ Number Street _____ City State ZIP Code	Clothing	various	

Debtor 1 **Marquita** **J** **Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?



No



Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.



No



Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Coxwell Attorneys	Attorney's Fee		
Person Who Was Paid			
1675 Lakeland Dr Ste 102		4/17/2025	\$500.00
Number Street			
Jackson, MS 39216-4850			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.



No



Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.



No

☐ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer _____			_____
Number Street _____			

City State ZIP Code _____			
Person's relationship to you _____			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?
 (These are often called *asset-protection devices*.)



No

☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.



No

☐ Yes. Fill in the details.

Debtor 1	Marquita	J	Leflore	Case number (if known) _____	
	First Name	Middle Name	Last Name		

		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution		XXXX- _____	<input type="checkbox"/> Checking	_____	_____
Number Street			<input type="checkbox"/> Savings		
			<input type="checkbox"/> Money market		
			<input type="checkbox"/> Brokerage		
			<input type="checkbox"/> Other _____		
City	State	ZIP Code			

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?



No



Yes. Fill in the details.

		Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution		Name		<input type="checkbox"/> No
Number Street		Number Street		<input type="checkbox"/> Yes
		City State ZIP Code		
City	State	ZIP Code		

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?



No



Yes. Fill in the details.

		Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility		Name		<input type="checkbox"/> No
Number Street		Number Street		<input type="checkbox"/> Yes
		City State ZIP Code		
City	State	ZIP Code		

Where is the property?	Describe the property	Value
<div> <div>Number</div> <div>Street</div> </div> <div></div> <div></div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div>	debtor's name on minor son's bank account with capital one	

Governmental unit		Environmental law, if you know it	Date of notice
<hr/> Governmental unit			<hr/>
<hr/> Number	<hr/> Street		
<hr/> City	<hr/> State ZIP Code		

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1		Marquita		J	Leflore		Case number (if known) _____	
		First Name		Middle Name	Last Name			

		Governmental unit		Environmental law, if you know it		Date of notice	
Name of site		Governmental unit					
Number Street		Number Street					
City State ZIP Code		City State ZIP Code					

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Fill in the details.

		Court or agency		Nature of the case		Status of the case	
Case title		Court Name				<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
		Number Street					
Case number		City State ZIP Code					

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)

☐ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Marquitable Essentials LLC		Describe the nature of the business		Employer Identification number	
Name		Marketing & graphic design		Do not include Social Security number or ITIN.	
				EIN: _____	
		Name of accountant or bookkeeper		Dates business existed	
Number Street				From <u>2020</u> To <u>ongoing</u>	
City State ZIP Code					

Debtor 1 **Marquita** **J** **Leflore** Case number (if known) _____
 First Name Middle Name Last Name

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.



No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City

State

ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

/s/ Marquita J Leflore

Signature of Marquita J Leflore, Debtor 1

Date 04/18/2025

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?



No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?



No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Marquita</u>	<u>J</u>	<u>Leflore</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Mississippi</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>Hope FCU Mortgage</u>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <u>Homestead</u>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
<u>613 Cedar Springs Dr Jackson, MS</u>	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
<u>39212-5711</u>	<input checked="" type="checkbox"/> Retain the property and [explain]:	

Debtor 1 **Marquita** **J** **Leflore**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases **Will the lease be assumed?**

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Lessor's name: ☐ No
☐ Yes

Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Marquita J Leflore
 Signature of Debtor 1

Date 04/18/2025
 MM/ DD/ YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Southern District of Mississippi

In re Leflore, Marquita J

Case No. _____

Debtor

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept **\$4,000.00**

Prior to the filing of this statement I have received **\$500.00**

Balance Due **\$3,500.00**

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Adversary proceedings, objections to discharge, audits, 2004 exams, avoiding judicial liens, conversion to another chapter, relief from stay actions, tax discharge matters, student loans, stay violations, consumer litigation, and other matters listed in the Bankruptcy Service Agreement. Copy and postage charges: Debtor agrees that Attorney may charge without notice or documentation, a copy, postage, and handling expense of \$1.00 for each item noticed to creditors subject to court approval.

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/18/2025

Date

/s/ Rachel A Coxwell

Rachel A Coxwell

Signature of Attorney

Bar Number: 105559

Coxwell Attorneys

1675 Lakeland Dr Ste 102

Jackson, MS 39216-4850

Phone: (601) 948-4450

Coxwell Attorneys

Name of law firm

Date: **04/18/2025**

/s/ Marquita J Leflore

Marquita J Leflore